THE

ANNUAL REPORT

OF THE

Medical Officer of Health,

TO THE

AYLSHAM

Rural District Council,

FOR THE YEAR

1911.

Barnwell, Printer, Aylsham.

AYLSHAM RURAL DISTRICT.

To the Chairman, Ladies and Gentlemen of the Aylsham Rural District Council.

Ladies and Gentlemen,

I beg to submit the following report on the health and sanitary condition of your District for the year 1911.

POPULATION.—As enumerated at the recent census the population of the District is 17,344.

At the census			1881	the population was			18,051.
,,	,,	,,	1891	,,	,,	,,	17,452.
,,	,,	,,	1901	,,	,,	,,	17,053.
,,	,,	,,	1911	,,	,,	,,	17,344.

These figures show that in the twenty years 1881—1891 there was a serious decline, amounting to just a thousand inhabitants in the population of the District, and it is therefore satisfactory to find evidence of the turn of the tide in the fact that in the last ten years there is an increase of 291. This increase is, however, very unevenly divided between the two sub-districts. The Buxton sub-district claims 212 of the total while the Eynsford sub-district, which is more distinctly agricultural in character, shows an increase of only 79. When a more particular analysis is made it is found that in the two residential parishes of Aylsham and Coltishall there is a combined increase of 224, while in many of the agricultural parishes such as Burgh, Heydon, Skeyton, Tuttington and Wickmere, there is an actual loss. It is therefore not safe to deduce from our last census returns a "back to the land" tendency.

BIRTHS.—The total number of births (including two "transfers") was 365, the lowest on record for the last twelve years. The male children outnumbered the female by 15.

The birth-rate for the year stands at 20.9. This is considerably below the average for this District, as well as being below the average of the rate for England and Wales.

There were twenty-five illegitimates in the list of births.

DEATHS.—The number of deaths registered in the District was 205. To this figure must be added 7 " transferable deaths," namely deaths of persons belonging to this District dying away from home and consequently registered in other districts. The nett number of deaths is therefore 212 and the death-rate 12.2. This, following on the even lower death-rate of last year (11.6) is very satisfactory.

INFANTILE MORTALITY.—The deaths of infants under one year were 34, and the rate per 1000 births 93.1. This figure, though far below the mortality found in the large towns, is in excess of the average in the District for the past few years. The mortality of illegitimate children is generally found to be higher than among infants born in wedlock, but in this particular year the difference is very marked. Twenty-six legitimate infants died out of 340 legitimate children born, giving a rate of 76 per 1000 births. But among the twenty-five illegitimates born there were as many as eight deaths, which gives the astounding rate of 320.0 deaths per 1000 illegitimate births.

Among other interesting facts to be gathered from Table IV. is the absence, with the exception of one death from measles, of deaths from infectious disease. There are recorded, however, four deaths from diarrhœa which may no doubt be credited to the infection of food by flies, which were much in evidence during the Summer months. It will also be noted that of the 34 deaths fourteen occurred in the first seven days of life, a period during which the survival of the delicate infant most depends on skilful attention.

OLD AGE MORTALITY.—Rather more than fifty per cent. of the total number of deaths were of persons over sixty-five years of age.

INFECTIOUS DISEASE.

UN-NOTIFIABLE INFECTIOUS DISEASE.—The District has again been comparatively free from this class of infectious disease, and there have been only two fatal cases.

Measles was epidemic in Aylsham, Buxton, Brampton, and Coltishall, and it was found necessary to close the schools in those parishes for short periods.

Whooping cough was prevalent in Aylsham in March and April, and there were a few cases in Erpingham in May. During July and August cases were reported from Banningham, Barningham, and Coleby. The disease was very prevalent during the Autumn among the younger children in Hackford and Whitwell, necessitating the closure of the infants' department of the school for some weeks.

NOTIFIABLE INFECTIOUS DISEASE.—Cases notified 24. Rate per 1000 population 1.3. Death 1 (not including Pulmonary tuberculosis).

For the first time Pulmonary Phthisis is included in Table II. which sets forth the cases of infectious disease notified during the year. It will be noticed that only seven cases have been notified, but at present only those persons who are in receipt of parish relief or who are under treatment at a hospital are notifiable. When the new regulations come into force, and every case of pulmonary consumption is notified, it will be found that many more fresh cases will be recorded annually.

TABLE SHOWING DISTRIBUTION OF NOTIFIED INFECTIOUS DISEASE.

	Diphtheria.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Puerperal Fever.	Pulmonary Phthisis.	TOTALS.
Aylsham.. ..	—	1	—	—	—	—	1
Blickling ..	—	—	1	—	—	—	1
Brampton ..	—	—	—	—	—	1	1
Cawston ..	—	—	2	—	—	1	3
Coltishall ..	2	—	1	—	—	—	3
Erpingham ..	—	—	—	—	—	1	1
Foulsham ..	—	—	2	—	—	—	2
Hackford ..	—	1	—	—	—	—	1
Heydon	—	—	—	—	—	2	2
Itteringham ..	—	—	—	—	—	1	1
Marsham.. ..	2	—	—	—	—	—	2
Oulton	2	—	—	—	—	—	2
Reepham.. ..	—	—	—	—	—	1	1
Scottow	—	—	—	1	—	—	1
Stratton Strawless	1	—	—	—	—	—	1
Thurning ..	1	—	—	—	—	—	1
TOTAL ..	8	2	6	1	—	7	24

DIPHTHERIA.—I have to record one death from diphtheria, that of a child aged two years who died six weeks after the beginning of the disease from heart paralysis. Eight cases were notified, but not more than two from any one parish. Diphtheria was not therefore epidemic in the District.

A full account is given in my Annual Report for 1910 of the measures taken by the District Council to assist in the diagnosis, treatment, and the prevention of the spread of the disease by providing for the free examination of swabs and by making payments to medical practitioners for the administration of antitoxin, both as a curative and a prophylactic agent. The disease is now far more under control than formerly, and few cases escape detection and notification. It has become quite impossible for diphtheria to take possession of a village without warning, as happened a few years ago at Wood Dalling.

SCARLET FEVER.—Although I have only six cases to report it is useful to show the incidence of this disease in tabular form as in former Annual Reports. There were no deaths.

TABLE SHOWING THE INCIDENCE OF SCARLET FEVER.

	Blickling.	Cawston.	Coltishall.	Foulsham.	Totals.
January	—	—	—	—	—
February ..	—	—	1	—	1
March	—	—	—	—	—
April	—	—	—	—	—
May	—	—	—	—	—
June	—	—	—	—	—
July	—	—	—	—	—
August	1	—	—	—	1
September ..	—	—	—	—	—
October	—	—	—	2	2
November ..	—	—	—	—	—
December ..	—	2	—	—	2
Totals ..	1	2	1	2	6

ENTERIC FEVER.—One case only has been notified and it was not possible to trace the source of the infection. During the last three years only two cases of enteric have occurred in the District and, as the absence of enteric is a fair index of the sanitary condition of a locality, it is satisfactory to note the rare occurrence of this disease in recent years.

CANCER.—Seventeen deaths were due to malignant disease, which gives a cancer death-rate of 0.98. This is about the average for the District and county.

TUBERCULOSIS.—Fourteen deaths have been registered as due to Pulmonary Phthisis and eleven as due to other forms of tubercular disease, which gives a Phthisis death-rate of 0.80 and a Tubercular death-rate of 1.44, which are somewhat high rates for this county. I find that in the previous year the rates in this District were about half this, namely the phthisis death-rate was 0.41 and the tubercular death-rate was 0.59. This shows how necessary it is to make observations extending over a number of years before concluding that a locality is either favourable to Phthisis or otherwise.

During the year six cases have been notified to me under the Public Health (Tuberculosis) Regulations, 1908, and one case under the Public Health (Tuberculosis in Hospitals) Regulations, 1911. The action taken in these cases has been described in my Annual Reports for the two previous years and include the supply of Jeye's fluid, spitting cups, a card of instructions, and, in the event of death, the disinfection of the room occupied by the patient.

With the commencement of the present year (Jan. 1912), under the Public Health (Tuberculosis) Regulations, 1911, Pulmonary Phthisis becomes compulsorily notifiable by medical practitioners, whether the case occurs in their public or private practice. Under these regulations very full powers are granted to Rural District Councils to make provision for the prevention of

the spread of consumption. They include measures for the detection of the disease in its early stages, the treatment of the patient in a sanatorium or at home, and generally for the provision of anything and everything that can possibly help in reducing the mortality from this, the most formidable preventible disease of modern times. The Sanitary Committee, acting on my advice, have already made arrangements with Dr. Claridge for the free bacteriological examination of sputum sent to him by medical men practising in the District who may be in doubt as to the diagnosis of cases in the early stage. This is a very important and useful first step, but it is obvious that but little good would result from merely the early detection and registration of every case of consumption occurring in your District. The regulations of 1911 contemplate very much more than this. Under the provisions of the National Insurance Act, one and a half million pounds will be available as a capital sum for the building of sanatoria, and a proportion of this sum (probably about £10,000) will be allocated to Norfolk. In addition to this there will be the annual contributions of insured persons under the same Act, which will provide for the maintenance of these institutions and for treatment in them of the insured persons. There will, however, still remain in your District cases of consumption unprovided for which will need your help. It is possible that in the course of the current year, some combined scheme for the county, in which this District may share, will be evolved. In the meantime much useful information will be collected, and from the classification of the cases notified it will be possible to form an opinion as to the requirements of the District for sanatorium accommodation.

TABLE SHOWING DEATHS FROM TUBERCULAR DISEASES FOR THE YEAR 1911 AND TEN PREVIOUS YEARS.

Year.	Deaths from Pulmonary Phthisis.	Deaths from other tubercular disease.	Deaths from all tubercular disease.	Tubercular death-rate per 1000 population.
1901.	19	3	22	—
1902.	16	2	18	—
1903.	20	3	23	—
1904.	14	3	17	—
1905.	13	7	20	—
1906.	20	3	23	—
1907.	18	2	20	—
1908.	15	2	17	1·01
1909.	11	3	14	0 83
1910.	7	3	10	0·59
Average for ten years	15·3	3·1	18·4	
1911.	14	11	25	1·44

VACCINATION.

EYNSFORD SUB-DISTRICT.

Primary Vaccinations	121 (births 159)
Children exempted under "Conscience Clause"	22
Summonses	0

BUXTON SUB-DISTRICT.

Primary Vaccinations	164 (births 204)
Children exempted under "Conscience Clause"	30
Summonses	0

These figures, when compared with those relating to previous years, show still further increase in the proportion of children exempted under the operation of the "conscience clause."

DISINFECTION.—Rooms which had been occupied by persons suffering from infectious disease have been disinfected by Formic Aldehyde vapour as under :—

Scarlet Fever ...	9	Diphtheria ...	8
Phthisis ...	8	Measles ...	1

ISOLATION.—The Isolation Hospital, which has accommodation for three patients and a nurse, has not been used during the year.

It has been found by practical experience in this Rural District that, to be of service for ordinary cases of infectious disease, an isolation hospital must be in a constant state of preparedness for the reception of patients, and that the financial resources of a rural district are not sufficient to meet the expense entailed by this.

SANITARY CONDITION of the DISTRICT.

During the past year, for the first time in the history of the District, a whole-time properly qualified officer has been engaged in carrying out the duties of Inspector of Nuisances. The appointment of Mr. Weatherbed has been made at a most opportune time, as a very large amount of work has been added to the duties of the Inspector by the coming into force of the Housing and Town Planning Act. Good progress has been made with the systematic inspection of dwelling houses under this Act, and records of the sanitary condition of the cottages in six villages have been completed. This systematic inspection has necessarily brought to light many insanitary conditions which would otherwise have been left undiscovered, and these added to others, which have come under the notice of the Inspector in the ordinary course of his duties, have resulted in a great increase in the useful work accomplished during the year.

DRAINAGE.—The several sewer outfalls connected with the drainage of Aylsham, Foulsham, Coltishall, and Reepham have been cleaned out when found necessary.

In Aylsham a new 18in. gully has been fixed in Millgate Street, and in Hungate Street a gully has been improved by a concrete dishing.

In Reepham a new inspection chamber has been constructed connecting the drain from the Back Street with the sewer at the rear of Reepham Rectory, and in the parish of Whitwell, close by Reepham Rectory, fifty yards of glazed pipe has been laid. This constitutes a great improvement in the drainage system of Reepham.

At Coltishall a new gully and ventilating pipe have been placed in the main street.

Twenty nuisances connected with private drains were dealt with during the year.

RIVER POLLUTION.—My Annual Reports for the years 1909 and 1910 contain a paragraph on the pollution of the river Bure as it passes through the parish of Coltishall. I have considered it my duty to pay special attention to this subject as it has been proposed to draw a public water supply from the river some distance lower down the stream.

At a meeting of owners of property in Coltishall, called to consider the matter, I had the opportunity of explaining the importance of preserving the purity of the water in the river. Mainly as a result of that meeting, I am now able to report that all the most dangerous drainage, namely that connected with W.C's and the overflow from W.C. cesspools, has been cut off. The drainage which still reaches the river, consists of bath, waste, sink water, waste from malthouses, etc., and the larger part of

this becomes practically purified by traversing a considerable length of dyke before reaching the river.

WATER SUPPLY.—There is no public water supply to any of the villages in the District. Private wells of varying depth supply the needs of the people. The surface water wells are in constant danger of pollution by percolation from sunk privy bins, slop holes and refuse heaps, and the maintenance of a pure water supply depends more on the removal of these sources of contamination than on the cleaning out and the repair of the wells themselves. During the year three new wells have been sunk and nine wells have been cleaned out or repairad.

PUBLIC SCAVENGING.—The adoption of public scavenging for Aylsham has resulted in a very great improvement in the sanitation of the town, and made it possible to remove a large number of deep privy bins and middens. The system was introduced at the beginning of 1908, and by the end of that year a hundred and fifteen pail closets were on the scavenger's list. This number has now increased to three hundred and seven. In addition to this a large number of middens have been replaced by covered galvanised iron bins.

In some other villages in the District, where the cottages are crowded together without gardens, the pail system is gradually superseding the large privy bin, and the need of a public scavenger is becoming apparent.

In two former Annual Reports I have referred to the advantage which would follow the introduction of public scavenging into the town of Reepham. The proposal has been submitted by the Sanitary Committee to the Hackford Parish Council, which is concerned with the greater part of the town of Reepham, for their consideration. In the opinion of this body no necessity exists for the introduction of the system, and the question therefore remains for the present in abeyance.

PRIVIES AND ASHPITS.—Nuisances arising in connection with privies and ashpits, for the abatement of which structural alteration is necessary, are of frequent occurrence. During the year seventeen new privies on the pail system and three bin privies have been built. Twenty-nine bin privies have been altered to the pail system. The number of pail privies has accordingly increased during the year by forty-six. The general objection raised by both landlord and tenant to the adoption of the pail system is the difficulty in arranging for the pails being regularly emptied. This objection of course disappears where public scavenging is carried out.

SUPERVISED PREMISES.

DAIRIES AND COWSHEDS.—Special attention was directed during the year 1908 to the subject of dairies and cowsheds, and in my Annual Report for that year is a description of the defects generally found in these premises. During the year inspections have been made and improvements effected, notably in the Whitwell dairy. Much, however, still remains to be done before the premises are brought up to the standard demanded by the Bye-laws in force in the District.

BAKEHOUSES.—The bakehouses have been under inspection and found to be clean and well kept.

SLAUGHTER HOUSES.—No bye-laws with respect to slaughter houses have been adopted for the District, nor do I think the model bye-laws of the Local Government Board, which are framed on the assumption that sewers and a public water supply are available, would be of much service in this District. The objectionable feature most often met with in slaughter houses is a blood hole placed immediately outside the building and directly connected with it. As it is a common practice to hang meat in the slaughter house, and this blood hole is always found partly filled with putrifying blood, it would seem not unlikely that

the meat should become tainted. My experience is that the most satisfactory arrangement in country districts, where there is no public water supply and no sewer, is to have no drain whatever leave the slaughter house. The blood and washings should be collected in a fixed boiler sunk in the floor of the slaughter house, and from this they should be bailed out and removed in a water cart immediately after each slaughtering.

HOUSING & TOWN PLANNING ACT.

The work connected with this Act occupies the greater part of the time of the Inspector. The plan adopted by the committee has been to have a complete inspection made of each village and the details of the sanitary condition of the cottages recorded on sheets under the headings set forth in Articles II. and III. of the Local Government Board Circular of the 3rd of Sept., 1910. Each sheet holds the descriptions of four cottages. When the inspection of any village is completed the sheets are placed in a portfolio marked with the name of the village. The general sanitary condition of the village, including the cottage accommodation, is then reviewed by the committee. Whenever, in the course of the inspection conditions are discovered which call for action to be taken by the committee, the case is entered in the Inspector's Report Book, through which it is brought before the committee at each of their meetings until the work necessary to put the cottage in a satisfactory state is done. The result of action taken is then chronicled in the appropriate columns of the sheet.

This systematic inspection of cottages brings to light many in-sanitary conditions which would otherwise never have occupied the attention of the Inspector. The occupiers of cottages, especially in those parishes where cottages are scarce, are generally disinclined to make complaints and are content to live under conditions prejudicial to health rather than risk the inconvenience of moving. In many instances, also, the tenant is found to be

indifferent to his sanitary surroundings, and sees no advantage in having proper provision made for the lighting and ventilation of his cottage, while he regards a damp wall as damaging to the wall paper but not a danger to the health of himself and family. It is therefore only by systematic inspection, without waiting for complaints, that an improvement can be effected in housing conditions.

During the year 320 cottages have been inspected in the parishes of Barningham Parva, Belaugh, Coltishall, Marsham, Stratton Strawless and Tuttington, but it is impossible in this report to present a full account of the improvements effected in these six parishes. The following table contains the information and particulars required by Article V. of the Order of the Local Government Board of the 2nd Sept., 1910.

Number of dwelling houses inspected	320
Number of dwelling houses which, on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	7
Number of representations to the Local Authority with a view to the making of closing orders	7
Number of closing orders made	7
Number of dwelling houses the defects in which were remedied without the making of closing orders	33
Number of dwelling houses which, after the making of closing orders, were put into a fit state for human habitation	1

The general character of defects found to exist were :—

(*a*) Dampness due to defective eaves, guttering, or to absence of damp course	55
(*b*) Defective privies	43
(*c*) Deficiency in lighting	21
(*d*) Deficiency in ventilation	22

As regards bedroom accommodation of the 320 cottages inspected—

14	were found to have	1	bedroom.
175	„ „ „	2	bedrooms.
97	„ „ „	3	„
30	„ „ „	more than 3	„

Sixteen of the cottages were found to be over-crowded.

It has not been found necessary at present to take any action under Part III. of the Principal Act.

FACTORY AND WORKSHOP ACT, 1901.

Number of Factories on list at end of 1910 - -	32
Number added in 1911 - - - -	0
Number of Workshops on list at end of 1910 - -	104
Number added in 1911 - - - -	8

Sanitary defects found :—

Want of cleanliness - - -	2
Insufficient sanitary accommodation - -	1

I have the honour to remain,

Your obedient servant,

H. H. BACK, M.B. (Lond.),

Medical Officer of Health to the Aylsham Rural District Council.

Acle, Norfolk,
April, 1912.

SUMMARY OF SANITARY WORK DONE IN 1911.

Complaints received	60
Nuisances detected without complaint	145
Nuisances abated	167
Cottages inspected	479
Lodging houses inspected	1
Slaughter houses inspected	13
Bakehouses inspected	11
Dairies and Milkshops inspected	2
Cowsheds inspected	6
Workshops inspected	31
Filthy houses cleansed	7
Houses disinfected	26
Overcrowding abated	7
Houses placed in habitable condition	33
Dwelling houses closed	7
Houses erected or re-built—water certificate sought	4
Wells sunk or water supply improved	3
Wells cleansed or repaired	9
Houses connected with sewers	2
Privies constructed or altered	20
Privies repaired	13

Cases of Infectious Disease notified during the Year 1911.

Notifiable Disease.	At all Ages.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	TOTAL CASES. Eynsford Sub-district.	TOTAL CASES. Buxton Sub-district.
Diphtheria (including Membranous Croup)	8	4	2	1	—	1	3	5
Erysipelas	2	1	—	—	—	1	1	1
Scarlet Fever	6	1	3	2	—	—	5	1
Enteric Fever	1	—	—	—	—	1	—	1
Phthisis — Under Tuberculosis Regulations, 1908	6	—	1	2	2	1	4	2
Phthisis — Under Tuberculosis Regulations, 1911	1	—	—	1	—	—	1	—
Totals	24	6	6	6	2	4	14	10

Causes of, and Ages at Death, during the Year 1911.

Causes of Death.	All Ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards.
All Causes { Certified	205	32	5	4	2	6	22	30	104
All Causes { Uncertified	7	2	—	—	—	—	—	—	5
Measles	1	1	—	—	—	—	—	—	—
Whooping Cough	1	—	1	—	—	—	—	—	—
Diphtheria and Croup	1	—	—	1	—	—	—	—	—
Phthisis (Pulmonary Tuberculosis)	14	—	—	—	1	4	7	1	1
Other Tuberculous Diseases	11	2	—	1	1	—	4	1	2
Rheumatic Fever	1	—	—	—	—	—	1	—	—
Cancer, malignant disease	17	—	—	—	—	—	—	4	13
Bronchitis	21	4	—	2	—	—	—	1	14
Broncho-Pneumonia	4	—	3	—	—	—	—	—	1
Pneumonia (all other forms)	6	—	—	—	—	2	1	2	1
Other diseases of Respiratory Organs	1	—	—	—	—	—	—	1	—
Diarrhœa and Enteritis	5	4	—	—	—	—	—	—	1
Cirrhosis of Liver	2	—	—	—	—	—	1	1	—
Nephritis and Bright's Disease	1	—	—	—	—	—	—	1	—
Congenital Debility and Malformation, including Premature Birth	15	15	—	—	—	—	—	—	—
Violent Deaths, excluding Suicide	3	1	—	—	—	—	—	2	—
Suicides	5	—	—	—	—	—	2	2	1
Other Defined Diseases	62	4	—	—	—	—	5	13	40
Diseases ill defined or unknown	40	2	1	—	—	—	1	1	35
Totals	212	34	5	4	2	6	22	30	109

Infant Mortality during the Year 1911.

Nett Deaths from stated Causes at various Ages under One Year of Age.

Cause of Death.	Under 1 week.	1 to weeks.	2 to 3 weeks.	3 to 4 weeks.	Total under 1 month.	1 to 3 months.	3 to 6 months.	6 to 9 months.	9 to 12 months.	Total Deaths under 1 year.
All Causes { Certified -	12	2	2	2	18	3	6	4	1	32
All Causes { Uncertified -	2	—	—	—	2	—	—	—	—	—
Measles - -	—	—	—	—	—	—	—	1	—	1
Diarrhœa - -	—	—	—	1	1	1	1	1	—	4
Other Tuberculous Diseases -	—	—	—	—	—	—	2	—	—	2
Congenital Malformations -	1	—	—	—	1	—	—	—	—	1
Premature Birth - -	4	—	—	—	4	—	—	—	—	4
Atrophy, Debility and Marasmus	6	1	1	—	8	—	—	—	1	9
Injury at Birth - -	1	—	—	—	1	—	—	—	—	1
Convulsions - -	2	1	—	—	3	1	—	—	—	4
Gastritis - -	—	—	—	—	—	—	1	—	—	1
Bronchitis - -	—	—	—	—	—	1	1	2	—	4
Other Causes - -	—	—	1	1	2	—	1	—	—	3

Nett Births in the year { Legitimate - 340 / Illegitimate 25

Nett Deaths in the year { Legitimate Infants - 26 / Illegitimate Infants 8